

HFP County Buy-In Terminology*:

- **Annual Eligibility Review (AER)** – The once-a-year process of confirming continued eligibility in the Healthy Families Program or the HFP County Buy-In Program.
- **Appeal** – Asking for reconsideration of a Healthy Families Program or HFP County Buy-In Program decision.
- **Applicant** – A person who is a birth or adoptive parent, a legal guardian, or a caretaker relative, or stepparent with whom a child lives, who applies for coverage on behalf of a child. An applicant can also be an emancipated minor, or a minor not living in the home of a birth or adoptive parent, a legal guardian, caretaker relative, foster parent, or stepparent, applying for coverage on behalf of his or her child or on his or her own behalf.
- **Benefits** – the health, dental, vision services your child receives under the Health Families Program or the HFP County Buy-In Program.
- **Benefit Year** – The period of 12 months, from July 1 to June 30.
- **Binding Arbitration** – An agreement between some insurance plans and subscribers to have health care disputes reviewed by a neutral person. After reviewing all facts and hearing both sides, the neutral person makes a decision. Both parties agree to accept that decision.
- **California Children's Services (CCS)** – This program provides diagnostic, treatment and case management services to children under the age of 19 who have medical conditions that meet the CCS medical eligibility criteria.
- **Certified Application Assistant (CAA)** – Person trained and certified to help you fill out the Healthy Families Program application free of charge.
- **Community Provider Plan (CPP)** – The health plan in a county that has done the best job of including traditional and safety net providers in its network. Traditional and safety net providers are the doctors, clinics, and hospitals that have provides health care to uninsured families. The CPP is available at discounted premium rates--\$3.00 discount per child.
- **Consolidated Omnibus Budget Reconciliation Act (COBRA)** – COBRA refers to the federal law giving people under certain circumstances the right to continue coverage in an employee health plan for a limited time.
- **Co-payment** – a payment that a subscriber makes at the time of receiving certain services, such as visits to a doctor and prescription drugs.
- **Coverage** – The services provided by an insurance plan participating in the Healthy Families Program or the HFP County Buy-In Program.
- **Disenrollment** – The end of enrollment in the Healthy Families Program or the HFP County Buy-In Program.
- **Eligible** – A child who meets all the requirements to qualify for coverage in the Healthy Families or the HFP County Buy-In Program.
- **Employer sponsored Health Insurance** – A benefit offered by an employer, at a cost or no cost to his/her employees, that includes health coverage.
- **Enrollment in the Insurance Plan (effective date)** – After the child has been determined eligible, the first date that they can receive services. This is usually 10 days after enrollment in the Healthy Families Program or the HFP County Buy-In Program.

- **Exclusion** – A service or condition not covered by an insurance plan under Healthy Families or the HFP County Buy-In Program.
- **Exclusive Provider Organization (EPO)** – A health plan whose members must seek care from a list of contracting providers. An EPO does not require you to choose a Primary Care Physician. Members also may self-refer to a specialist in the EPO contract network.
- **FIG (Federal Income Guidelines)** – Federal Income Guidelines are the amount of money the federal government says that a family needs to meet basic needs. The income guideline changes every year in April. If your income is over the guideline, check to see if the guideline chart has been updated for this year.
- **HMO (Health Maintenance Organization)** – An organized system that provides a set of health care services to plan subscribers in a geographic area.
- **Household Income** – The total income before taxes and after required deductions of family members counted in a household.
- **Insurance Plan** – A health, dental or vision company that provides coverage to subscribers.
- **Medi-Cal 133% Program** – This program is for children age 1 up to age 6 whose family income is up to 133% of Federal Income Guidelines.
- **Minor** – Child under the age of 18.
- **No-Cost Medi-Cal** – A Medi-Cal program that pays for all services without requiring any payments or co-payments by the subscriber.
- **Open Enrollment (OE)** – A period of time (April 15 – May 31 each year) when a family can request a change of insurance plan for any reason. Changes take effect on July 1.
- **Out-of-Network** – A service provided by a doctor, dentist, or other provider who does not have a contract with your family's insurance plan.
- **Premium** – The subscriber amount owed each month for children enrolled in the Healthy Families Program or the HFP County Buy-In Program.
- **Premium Re-Evaluation Form** – The form can be submitted by an applicant when income or deductions have changed to find out if the Healthy Families Program or the HFP County Buy-In Program can lower the monthly premiums. The form can also be used to request that the application be sent to the Medi-Cal Program for a no-cost Medi-Cal eligibility determination.
- **Primary Care Dentist** – The dentist, selected by the applicant, who will be in charge of the family's dental care.
- **Primary Care Physician** – The doctor, selected by the applicant, who will be in charge of the family's health care and who will make a referral to specialists as needed.
- **Share of Cost Medi-Cal** – A Medi-Cal program that requires a subscriber to pay a certain amount of the medical expenses every month before it covers benefits. It is based on monthly income.
- **Sponsor** – A person or entity who is registered with the Managed Risk Medical Insurance Board (MRMIB) and who pays a family's premium on behalf of an applicant for any twelve (12) months in the program.
- **Subscriber** – A family member enrolled in the Health Families Program or HFP County Buy-In Program.
- **Well-child Checkups** – Health, dental and vision services such as immunizations and physical, dental, and eye exams. These check-ups are provided to help families stay healthy.

(*Source: HFP Handbook June 2005)